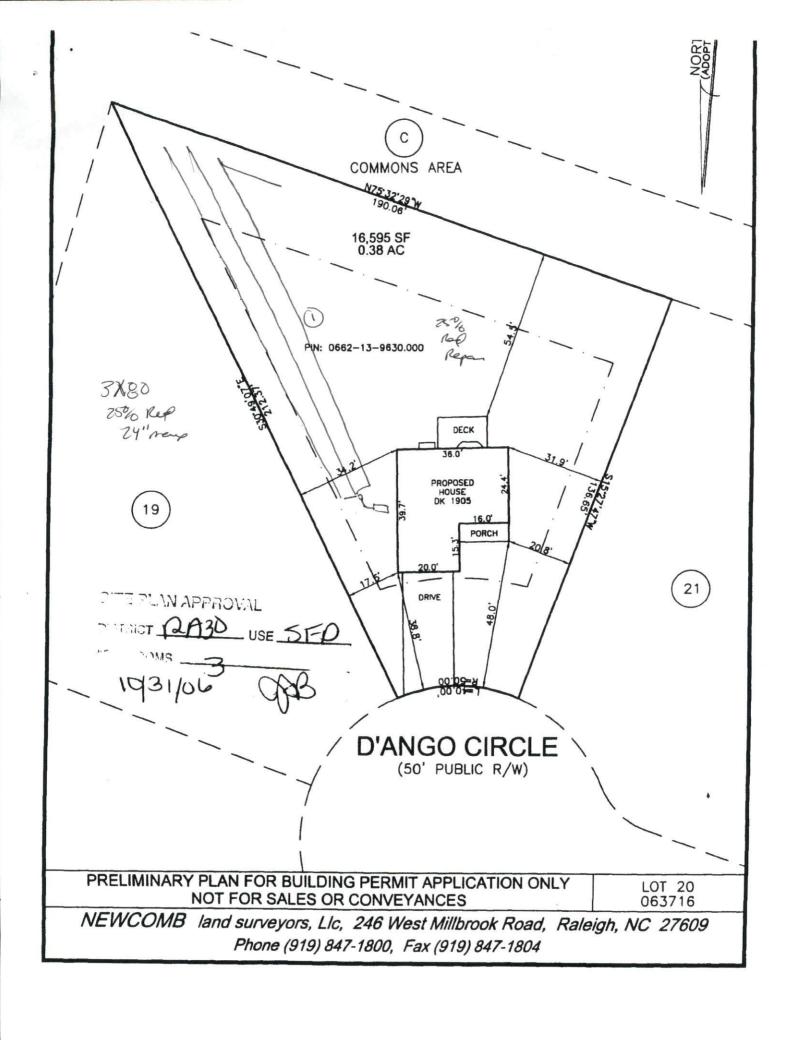
Initial Application Date: 10 /24/06 Application # C0500/0088			
COUNTY OF HARNETT LAND USE APPLICATION  Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org			
LANDOWNER: I AN Properties HC Mailing Address: 5 West Hargett St			
City: Raleigh State: NC zip: 27601 Home #: Contact #: 538-7018			
APPLICANT*:Mailing Address:			
City:State:Zip:Horne #:Contact #: *Please fill out applicant information if different than landowner			
PROPERTY LOCATION: State Road # 1403 State Road Name: 1+cm++ Central			
Parcel: D4 0062 0015 23 PIN: 062-13-9630.000			
zoning: RA30 Subdivision: Pear Meadow Lot #: 20 Lot Size: 138 ac			
Flood Plain: X Panel: 50 Watershed: NP Deed Book/Page: 2283/325 Plat Book/Page: 2001 1018			
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 TOWARD ANGLES TURN			
On Harnett Central Rd -turn (B) into			
fear Meadern			
PROPOSED USE:			
SFD (Size 36 x 42 # Bedrooms 3 # Baths 2,5 Basement (w/wo bath) Garage 418 Deck 146 Crawl Spage / Slab			
Modular:On frameOff frame (Sizex) # Bedrooms # Baths Garage(site built?) Deck(site built?)			
Multi-Family Dwelling No. UnitsNo. Bedrooms/Unit			
Manufactured Home:SWDWTW (Sizex) # Bedrooms Garage(site built?) Deck(site built?)			
Business Sq. Ft. Retail SpaceType#Employees:Hours of Operation:			
- Triployeesnours of Operation:			
" Buttonia			
☐ Home Occupation (Size x ) # Rooms UseHours of Operation:			
(0.00			
Closets in addition() yes () no			
Nater Supply: (C) County () Well (No. dwellings) () Other			
Sewage Supply: ( New Septic Tank (Need to fill out New Tank Checklist) ( Existing Septic Tank ( County Sewer ( Other			
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above?   YES (1)NO			
Structures on this tract of land: Single family dwellings Manufactured Homes Other (specify)			
Required Residential Property Line Setbacks: Comments:			
Front Minimum 35 Actual 38,8			
Rear <u>25</u> <u>54,5</u>			
Side $\underline{10}$ $\underline{11}$ $\underline{11}$ $\underline{11}$			
Corner/Sidestreet 20 34, 2			
learest Building 10 20.8 n same lot			
permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of plans			
ubmitted. I hereby state that the foregoing statements are accurate and correct to the best of my knowledge. This permit is subject to revocation if false			
information is provided on this form.			
Day Constetur 10/24/06			
Signature of Owner or Owner's Agent			

\*\*This application expires 6 months from the initial date if no permits have been issued\*\*

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION



OWNERNAME: 1HN Properties, LLC

APPLICATION #: 0(050010088

## \*This application to be filled out only when applying for a new septic system.\* County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either

expi	nonths or without expiration)	piration depending upon documentation submitted. (complete site plan = 60 months; complete plat = withou		
DE	VELOPMENT INFO	ORMATION		
	New single family residence			
	Expansion of existing system			
	Repair to malfunctioning sewage disposal system			
	Non-residential type			
WA	TER SUPPLY			
	New well	_		
	Existing well			
	Community well			
	Public water	·		
	Spring			
		lls, springs, or existing waterlines on this property? {} yes {}} no { \( \sum \) unknown		
	and the same of th	unknown		
SEP	TIC			
If ap	plying for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{}}	Accepted	{}} Innovative		
{}}	Alternative	{}} Other		
{}}	Conventional	{ <u></u> <u></u> ✓∫ Any		
The a	applicant shall notify tion. If the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant must attach supporting documentation.		
{_}}	YES { \(\bug{\bu}\) NO	Does The Site Contain Any Jurisdictional Wetlands?		
{_}}	YES (U) NO	Does The Site Contain Any Existing Wastewater Systems?		
{_}}	YES { \( \bigsize \) NO	Is Any Wastewater Going To Be Generated On The Site Other Than Domestic Sewage?		
{_}}		Is The Site Subject To Approval By Any Other Public Agency?		
{_}}	YES {\(\nu\)} NO	Are There Any Easements Or Right Of Ways On This Property?		
I Hav	e Read This Applica	ation And Certify That The Information Provided Herein Is True, Complete And Correct.		
		State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine		
		able Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification		
		perty Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can		
Be Pe	rformed.	A second control contr		
	Day Cong	loton.		
PROF	PERTY OWNERS	DR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)  DATE		
	to the second of	DALE		